## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

03 9153-0449

CLAIMS AS FILED - PART I							SMALL ENTITY			OTHER THAN		
			(Column 1)		(Column 2)		TY	TYPE		OR SMALL E		ENTITY
TOTAL CLAIMS			22					RATE	FEE	]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BA	ASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			22 minus 20=		* 2			X\$ 9=		OR	X\$18=	36
INDEPENDENT CLAIMS			4 minus 3 =		* /			X42=		OR	X84=.	84
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT					⊦140=		OR	+280=	
* If	the difference	in column 1 is	less than zero, enter "0" ir			olumn 2		OTAL		OR	TOTAL	860
CLAIMS AS AMENDED - PART II											OTHER	THAN
		(Column 1)	(Column 2)			(Column 3) SMALL			ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	. [	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	,	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	;	X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM		+	-140=.	y e	OR	+280=	
								TOTAL		4	TOTAL	
		ADI	DIT. FEE		OR	ADDIT. FEE						
		(Column 1)	_	(Colur		(Column 3)						
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	>	<b>(\$ 9=</b>		OR	X\$18=	
	Independent	*	Minus	***		=	>	X42=		OR	X84=	
Ĺ	FIRST PRESE	NTATION OF MI	ULTIPLE DEI	PENDENT	CLAIM			140=		OR	+280=	
							L	TOTAL	-		TOTAL	
							ADE	OIT. FEE	· <u>-</u>	OR	ADDIT. FEE	
_		(Column 1)		(Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=	
	Independent		Minus	***		=	\;	(42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									٠ ا		
	f the entry in activ	mn 1 is loss than t	ha antorio act	ıma Ola	. *O* i= ==!	lumo 2	+	140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pa					found i	in the app	ropriate box	in col	umn 1.	